United Nations CRC/C/LSO/Q/2/Add.1

Convention on the Rights of the Child

Distr.: General
14 March 2018

English only

Committee on the Rights of the Child
Seventy-eighth session
14 May-1 June 2018
Item 4 of the provisional agenda
Consideration of reports of States parties

List of issues in relation to the second periodic report of Lesotho

Addendum

Replies of Lesotho to the list of issues*

[Date received: 16 February 2018]

* The present document is being issued without formal editing.

GE.18-03847(E)
1803847

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List of Abbreviations and Acronyms

ADH	Adolescent Health
AIDS	Acquired immuno-deficiency syndrome
ART	Antiretroviral treatment
BOS	Bureau of Statistics
CGP	Child Grant Programme
CGPU	Child and Gender Protection Unit
CPWA	Children's Protection and Welfare Act
CRC	Convention on the Rights of the Child
DCPT	District Child Protection Team
DHS	Demographic and Health Survey
MOSD	Ministry of Social Development
EmOC	Emergency Obstetrical Care
EU	European Union
FAO	Food and Agriculture Organization
FIDA	Federation of Women Lawyers in Lesotho
FPE	Free Primary Education
GBEM	Girls and Boys Education Movement
GDP	Gross domestic product
GOL	Government of Lesotho
HIV	Human immuno-deficiency virus
HPSU	Health Planning and Statistics Unit
ICHR	Inter-sectoral Committee on Human Rights
IECCD	Integrated Early Childhood Care and Development
ILO	International Labour Organization
IMCI	Integrated Management of Childhood Illnesses
IMAAI	Integrated Management of Adult and Adolescent Illnesses
IMAM	Integrated Management of Acute Malnutrition
JICA	Japanese International Cooperation Agency
JTC	Juvenile Training Centre
LANFE	Lesotho Association for Non-Formal Education
LCGP	Lesotho Child Grants Programme
LCA	Lesotho Communications Authority
LCN	Lesotho Council of NGOs
LCS	Lesotho Correctional Service
LDTC	Lesotho Distance Teaching Centre
LMPS	Lesotho Mounted Police Services
LS	Lesotho

LSC	Lesotho Save the Child
MOET	Ministry of Education and Training.
MOFDP	Ministry of Finance and Development Planning
MOGYSR	Ministry of Gender, Youth, Sports and Recreation
MOHA	Ministry of Home Affairs
MOSD	Ministry of Social Development
MOC	Ministry of Justice, and Correctional Service
MLCAHR	Ministry of Law, Constitutional Affairs and Human Rights
MOLE	Ministry of Labour and Employment
MOLGC	Ministry of Local Government and Chieftainship
NCDC	National Curriculum Development Centre
NFE	Non-Formal Education
NGO	Non-Governmental Organization
NOCC	National Orphans and Vulnerable Children Co-ordinating Committee
OVC	Orphans and vulnerable children
PEPFAR	President's Emergency Fund for AIDS Relief
PMTCT	Prevention of mother-to-child transmission of HIV
PSS	Psychosocial Support
SRH	Sexual and Reproductive Health
TB	Tuberculosis
TVET	Technical and Vocational Education and Training
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
US	United States
USAID	United States Agency for International Development
WB	World Bank
WFP	World Food Programme
WHO	World Health Organization

Introduction

1. The Government of Lesotho signed and ratified the CRC in 1990 and 1992 respectively. Part of the State Party's obligations is the submission of periodic reports to the African Union and UN Committee on the Rights of the Child meant to indicate progress towards implementation of the CRC. In fulfilment of these obligations, the Government of Lesotho (GoL) submitted and tabled for the first time a report that covered period 1990–1997. Since then a follow-up report was not submitted until the second one which covered 1998–2016. This report was submitted on August 2017.

2. As per the stipulated procedure, the State Party has since received a request to respond to a "List of Issues' from the UN Committee on the Rights of the Child by February 2018, a process meant to complement and clarify certain sections of the Report. It was on the basis of this request that GOL with financial support of UNICEF engaged a local consultant to assist with compiling a report of responses to the "List of Issues" from the UN Committee on the Rights of the Child for a period of seven (7) days.

Objective

3. The objective of the assignment is to compile a report responding to the UN CRC Report in order to provide additional information on the "List of Issues" raised by the UN Committee on the State Party's CRC Report.

Methodology

4. The approach followed for undertaking the assignment took three phases, namely:

(a) Consultative meetings with key technical officers responsible for implementation of different components of the CPWA 2011 as it relates to the CRC e.g. within MOSD met with Child Services, Legal, Bursary Administration, NISSA, and M&E;

(b) Follow-up meetings with sectors to seek further clarifications on issues that were not clear during the first encounter;

(c) Desk re iew of documentation provided during the sectoral meetings and follow-up sessions;

(d) Telephone discussions with sectors that were not available due to short notice and/or officers who had travelled;

(e) Compilation of the first draft of the report and sharing it with relevant sectors/respondents and incorporating comments.

Duration

5. The assignment took seven (7) days.

GOL's Responses to the UN's List of Issues in relation to the second periodic report on CRC implementation

Part 1

Answers to question 1

Steps taken and resources to implement, disseminate and translate CPWA into Sesotho and Braille

6. In 2013, MOSD produced both Simplified as well as Sesotho versions of the Child Protection and Welfare Act (CPWA). During the same year, both versions were extensively disseminated to all ten districts of the country and up to community level. During the dissemination process, Government realised that the Act does not adequately address emerging child protection issues such as child marriage, age of criminal responsibility and the establishment of a Central Authority and Adoption Agencies to mention but a few, as a result decided to defer translation of the Act to Braille to only after reviewing and amending it. Translation of the Act into Braille will only be taking place upon completion of the amendment process and this will be followed by development of the Act's regulations. In 2014, the Government costed selected provisions of CPWA with the purpose of providing Government with cost estimates on implementation of the Act in a phased manner. The costing report continues to be used for budgeting for child Protection issues by GOL and partners on annual basis. The CPWA 2011 is currently undergoing an amendment process in order to address the identified gaps.

7. The Government has secured funding from UNICEF to review implementation of the recently expired National Strategic Plan for OVC (NSPVC) 2012-17. This review will further inform the review and updating of the 2006 OVC Policy followed by development of a new and updated Strategic Plan.

8. With regard to the establishment of the Children's Commission, in 2011, the 6th amendment to the Constitution established the Human Rights Commission. In 2016, the Human Rights Act 2016 was enacted to operationalise the Commission which is vested with competence to promote and protect human rights and specifically deal with investigations on human rights violation. The Commission will be the protector of all human rights of Lesotho citizens as well as non-citizens. Every human being regardless of age, gender and status will benefit from the law. It is on this basis that Lesotho does not have a specific Commission that deals with children's rights since children will be covered by the same Commission. There are regulations to the Act, namely, Human Rights Commission (Selection Process for Members) Regulations 2016 which stipulates procedures that needs to be followed during appointment of the Commissioners. The structure of the Commission has been drawn up and approved by the Public Service Commission in principle. Consultations are on-going between Ministry of Law, Constitutional Affairs and Human Rights and MOPS as regards salary scale of the Commission staff.

Answers to question 2 and 3

Mandate, budgetary allocation and capacity of the Directorate of Child Protection Services

9. The Department of Child Protection Service's core mandate is to strengthen and facilitate the promotion and protection of the rights of the children, especially the vulnerable and marginalised and to coordinate stakeholder participation in the implementation of policy and strategic plans for vulnerable children. In order to carry out this function the Department works in collaboration with the following structures, the National Orphans and Vulnerable Children Coordinating Committee (NOCC) at national level and District and Community Child Protection Teams at district and community levels respectively. According to the existing organogram of the department which has been approved by Ministry of Public Service (MPS) the department has only 9 positions that include the Director. Three of these which include the Director are currently funded by the

Government and filled. Two are funded by partners and four are vacant and currently not funded. This implies that the department faces capacity challenges in terms of quantity and quality to adequately lead implementation of the Convention.

10. The NOCC is chaired by the Principal Secretary of MOSD and it meets on a quarterly basis to deliberate on promotion and protection of the rights of children and provide leadership in the implementation of the CRC. Membership includes various government line ministries, Civil Society Organizations (CSOs), the academia and development partners. The establishment of such a body was a sign of the country's political commitment to placing children's issues including those of OVC high on the national development agenda. There are various documents which guide the operations of the Committee. These include but not limited to the 2011 OVC Situation Analysis study and the National Strategic Plan for Vulnerable Children 2012–2017. Furthermore, the country is benefiting from the growing support of new role players such as the European Union, the Global Fund and USAID-PEPFAR supporting major child related projects in Lesotho. This is in addition to a multitude of small scale interventions for the child population implemented by Civil Society Organisations (CSOs). The Committee provides a mechanism for ensuring that the sectors are regularly accountable for delivering quality services in keeping with the best interests of the child.

11. The need for a formal coordinating committee comprising multi-sectoral membership is felt to be extremely urgent, particularly to drive the implementation of the CPWA, the NSPVC and the National Multi-sectoral Child Protection Strategy (2014/5–2018/9 as well as to monitor the effective implementation of other national Policy and strategic documents relevant for children. District and Community Child Protection Teams on the other hand convene on monthly basis chaired by the District Council Secretary (DSC) and Community Council Secretary respectively and MOSD is the secretariat. Membership include government sectors operating at district and grass-root level and CSOs providing child protection services at that level.

12. The Ministry of Law, Constitutional Affairs and Human Rights through its Human Rights Unit has a three thronged mandate: protection, promotion and monitoring of human rights in the country. The Unit strives to inculcate observance and respect of human rights which includes amongst others to assist in putting in place structures that will enable citizens to receive redress for violation of their human rights such as the Human Rights Commission, awareness raising campaigns and compiling State Party reports under the various regional and international human rights instruments. On the other hand, the MOSD's mandate is amongst others to protect and promote the rights of all poor and vulnerable groups and ensure their basic needs are met and this is achieved through formulation of policies, enactment of laws to mention a few. It is on the basis of the above that both Ministries have been instrumental in domesticating the CRC through the CPWA. The two Ministries further intend to collaborate with each other on regular basis and to undertake joint activities The Ministries were also involved in drafting the CRC report together.

13. MOSD having been mandated by the Government to play a leading role in CRC implementation has a management information system (MIS) that captures all ministerial activities which include CRC implementation at district and community levels. All the ten districts compile and submit to Head Quarters monthly and quarterly reports using a standard data collection tool that covers some areas of the Convention. The newly established National Information System for Social Assistance (NISSA) is a tool that the Government uses for targeting and registering the poorest of the poor households caring for vulnerable children for enrolment into the different social assistance programmes such as CGP, OVC bursaries, economic empowerment of household and to facilitate accessing health care services. The NISSA data collection tool does not capture data on child protection indicators for monitoring implementation of the Convention as yet. In the light of the above, MOSD has secured funding from UNICEF to develop a list of child protection indicators before the end of 2018 and facilitate their inclusion protection in the NISSA data collection tool in the next review in 2020.

Answer to question 4 and 5

Harmonization of definitions of a child

14. As earlier indicated, the CPWA 2011 is currently undergoing an amendment process and the CPWA Amendment Bill 2018 has harmonised all child related legislations and the definition of the child. These include the Sexual offences Act 2003 and Laws of Lerotholi. Further, the section on Marriage Act 1974 that allows girls to marry at the age of 16 is being repealed by the CPWA amendment Bill 2018.

15. The current CPWA Amendment Bill 2018 has taken into account elimination of all forms of discrimination against children by repealing all discriminatory clauses especially those related to girls with the exception of inheritance. The inheritance issue will be addressed during the Law Reforms process. Children with disabilities and albinism are catered for by the Disability Equity Bill 2018. Within the context of MoSD all the legislations do not discriminate against children, for example CPWA Section 19 declares children born out-of-the-wedlock as lawful inheritors of parental property and also protects them against property dispossession upon the death of their biological mother. Other pieces of legislation aimed at protecting children from gender discrimination include the Sexual Offences Act, and the Education Act and these are all taken on board in the CPWA Amendment Bill 2018.

Answer to question 6

Registration of births and deaths

16. In an attempt to accelerate birth registration, particularly in the rural areas, MOHA has partnered with MOLGC, Principal Chiefs' offices and MOH clinics are used for birth registration in order to increase coverage and issuance of birth certificates. MOLGC will be providing office space for MOHA officials in community councils throughout the country and this process is expected to take off by March 2018. Where the community councils are inaccessible, alternatives registration centers will be Principal Chiefs' offices and/or MOH and CHAL rural/urban clinics. MOHA also conducts outreach services to residential care facilities for vulnerable children where such children are registered on the same day through arrangements with MOSD and this happens through-out the country. With the support of UNICEF and the EU, mobile registration and citizen services centers provide registration of all vital events (births, deaths, marriages and divorces) especially for the hard to reach rural places.

17. The Government has not yet implemented any concrete measures to remove the penalty for late birth registration and therefore still stands at 4 Maloti.[1] MOHA has been tasked to fast track registration of births as well as address existing backlog within the next 36 months. To this effect, both Government and church clinics will accommodate MOHA registration officials. Pursuant to the National Identity Act 2011, the Office of the Registrar which is responsible for birth registration has been moved from the MOLGC to the MOHA- National Identity and Civil Registry Office.

Answer to question 7

Corporal punishment

18. Section 127 of the CPWA stipulates that corporal punishment and public humiliation shall not be elements of diversion. The Act further prevents Children's Courts from imposing sentences of corporal punishment or any form of punishment that is cruel, inhumane or degrading (Section 161). On the other hand, the CPWA Amendment Bill 2018 has removed the "justifiable discipline of children" as part of the amendment.

19. Regarding early detection of abuse in school settings, MOET has the "Life Skills and Resilience" programme as part of curricula for both primary and secondary schools. Through the support of UNICEF, teachers have been trained on "Life Skills and

[1] 4 Maluti is equivalent to 0.33 USD.

Resilience" as well as d CPWA in order to equip them with knowledge and skills for early detection of and response to violence and abuse in and out of school settings. Additionally, with the technical and financial support of UNICEF, MOET introduced the Child Friendly School Initiative which resulted in the development of an Implementation Manual in 2010/11. Areas covered by the manual include among others, protection mechanisms by students.

20. In spite of the above legal frameworks and other initiatives, corporal punishment still happens in schools and family. Teachers who still practise corporal punishment are normally subjected to disciplinary action pursuant to the 2005 Teachers Code of Good Practice and the Draft School Health Policy. Depending on the magnitude and nature of the punishment, teachers can also be charged and brought before the courts of law by parents. There are Child and Gender Protection Units (CGPU) within Police Stations in all 10 districts of the country which are) manned by police officials designated to handling child abuse issues. These police officers have been trained on the provisions of CPWA and other legal and policy measures relevant to child protection issues thus enabling them to detect violence and abuse and take remedial action on time in all settings.

21. Although not rolled out to the ten districts and all community councils, Community Council Child Protection Teams play critical roles in early detection and prevention of violence and child abuse at community level and within families. The recent resuscitation of the Child Helpline also serves as a platform where children can report acts of violence and abuse and seek immediate support. Child Helpline is currently managed by MOSD housed under an NGO by the name of, Tholoana-ea-Lerato. It is a tripartite initiative between MOSD, UNICEF and Tholoana ea Lerato. MOSD intends to conduct an in-depth study of Violence against Children (VaC) survey (2018) which will assist the Government in identifying the magnitude of the problem to help the Government in programme planning. Government is supporting the Lesotho Counselling Unit with subvention and Social Workers to help child victims, the Ministry of Gender has a center called Ka Lapeng which plays a vital role of taking care of abused children and providing counselling services to both children and adults in the centres.

Answer to question 8

Development and implementation of alternative care policy and minimum standards of care

22. In 2012, MOSD developed the Foster Care and Adoption Policy as well as Procedures and Practice Guidelines. The Procedures and Practice Guidelines are intended to create a common platform and also to ensure that the highest ethical standards are practised in delivering these two forms of alternative care.

23. There is also Government Gazette Vol. 59 of 2014 in place that allows for establishment of safe houses and shelters for abused children and as a result there are currently two such shelters, namely Lesotho Child Counselling Unit (LCCU) and Beautiful Dream Society. Both shelters' operations are regulated by the Residential Care Guidelines and Standards and currently enjoy the Government's support, with the former receiving subvention and the latter receiving subvention and key staff members.

24. In the CPWA Amendment Bill 2018 there is provision for establishment of an Adoption Agency as well as Central Authority that will address intercountry adoptions. The bill also caters for Standards of care and Guidelines to regulate alternative care institutions, including orphanages.

Answer to question 9

Accessibility of health facilities and support for sexual and reproductive health education and services for adolescents, including family planning and safe abortion

25. The Ministry of Health is currently developing a Reproductive, Maternal, New-born and Care Strategy for 2018–2022 to address the currently high prevalence of infant mortality, low immunisation coverage and access to HIV and AIDS services. The main activities include procurement of equipment and supplies to health facilities for providing

maternal and child health services and extensive training of Health Care Service providers at all levels on maternal and child health issues.

26. In 2014 MOH developed Minimum Standards and Implementation Guide for Adolescent Friendly Services to guide service providers at all levels on how to offer friendly services to adolescents and young people at all service delivery points. Outreach services and mobile clinics are run by nurses who are trained on adolescent friendly health care services. Currently only three districts have a staff complement that is appropriate for running an Adolescents Health Corner (ADH) and these are Maseru, Berea and Leribe comprising psychologist, nurses and peer educators. According to the 2006 National ADH Policy and 2014 Minimum Standards and Implementation Guide, all adolescents have a right to health services including those who request post-abortion services, a comprehensive sexuality education curriculum for out of school adolescents adapted to reach adolescents with sexual and reproductive health education.

27. In relation to the improvement of medicine supplies, in 2014, the Government developed a National Supply Chain Strategic Plan for 2013/14–2016/17 as one of the conditions for securing support from the Global Fund for Tuberculosis, HIV and AIDS and Malaria (GFTAM). One of the key activities in the strategic plan was establishment of a Supply Chain Unit (SCU) whose mandate was to strengthen supply chain systems for pharmaceuticals and other health commodities within the health sector which happened in 2015. The Unit is currently comprised of a seven member multitasked team of health professionals redeployed from Pharmaceuticals, Laboratory Services and Dental Departments. In 2015, the Unit introduced two new systems aimed at ensuring minimum to no stock-outs of essential medicines and other health commodities in health facilities throughout the country, namely, Informed Push System and Last Mile Delivery. The former mainly focuses on proper quantification, forecasting and record keeping whereby each health facility records and reports to the District Health Management Team (DHMT) on a monthly basis, stock on hand, quantities received and expired stock. This information provides DHMT with a clear picture of what the requirement of the districts are at any given time and therefore how much should be ordered. The latter on the other hand relates to National Drugs Supply Organisation (NDSO) taking the responsibility of delivering all essential medicines and other health commodities to all health facilities based on the needs and order of each facility. This responsibility of NDSO ensures that no supplies are lost between NDSO and their destinations. MOH is currently preparing to introduce electronic systems of the supply chain thus replacing the manual system through technical and financial support of UNFPA. Programmes that are part of this new initiative are SRH with its family planning supplies, Nutrition with food and supplements, Laboratory Services with laboratory supplies and commodities, TB with drugs and supplies, HIV and AIDS with ART supplies. To date only Dental Department and Expanded Programme Immunisation (EPI) Programme are not part of the initiative but hopefully they too will join.

Answer to question 10

Accessibility of school infrastructure and elimination of fees

28. MOET increased the number of Government owned public primary schools from four (4) in 2000 to one hundred and eighteen (118) in 2017 as part of the 2000 Free Primary Education Programme. The Ministry went further to make adjustments on the designs of the school structures by replacing stairs with ramps in order to improve access to classrooms for leaners with disabilities. Integration of people with special needs was introduced in some schools with the aim of increasing access to primary schools. To operationalise this initiative, MOET introduced the Special Education Courses in tertiary institutions like National University of Lesotho and Lesotho College of Education and trained teachers on the course at certificate and diploma levels. Lastly, the school feeding programme was reintroduced in order to ensure that children get at least one meal per day at public preschools and primary schools. The school feeding programme not only reduced absenteeism significantly amongst primary school going children, but it also improved on the concentration span of leaners in class.

29. On the issue of improving accessibility to secondary education, including steps to eliminate fees, MOET increased the number of public secondary schools from 12 in 2004 to 30 as of December 2017. According to MOET there are at least 2 public secondary schools in every district especially those in the rural areas while there are more in urban areas. MOET has also secured funding from the Japanese Government, African Development Bank and the World Bank by improving on existing schools through initiatives such as combining primary and secondary schools in the same compound thus catering for both levels with Leqele Primary and High Schools being a typical example.

30. Regarding elimination of fees, MOET has not been able to provide free secondary education due to the State's economic capacity however 3 initiatives have been introduced to address this. Firstly, secondary school students access books through a rental programme whereby, for a minimal fee, a student gets all the books at the beginning of the academic year and returns them at the end for use by another student the following year. The books are only replaced when torn or very old. Secondly, the Government regulates fees structures for all public schools in order to avoid those exorbitant fees by individual schools. Thirdly, the Government has also put in place the OVC Bursary Scheme which provides vulnerable children with school necessities comprised of books, school fees, uniform and hygiene kits. As of December 2017 the number of beneficiaries was 21, 304 and the number has since increased by 7, 620 as of February 2018.

31. The Disability Equity Bill 2018 addresses the challenges that infrastructure poses to children with disability regarding access to schools through provision of assistive devices such as glasses, white canes and hearing aids among others, to enhance mobility of such children. Through the Child Grant Programme (CGP), funds provided to marginalised children facilitate access to education through payment of fees or any other expenses that would otherwise prevent the child from schooling. The involvement of Her Majesty the Queen as a Champion for vulnerable children in Lesotho is seen in the Joint Workplan between MOSD, UNICEF and World Vision where during national commemoratory days such Menstrual Hygiene Day, the Day of the African Child and the International Day of the Girl Child to mention a few. Children are provided with hygiene kits and sanitary towels. This initiative contributes towards reducing high dropout rates and absenteeism in schools. MOSD currently supports schools/centres that take care of children with disabilities with subventions annually.

32. The Government has taken a number of steps to safeguard the right to education of adolescent mothers, children with disabilities, herd boys and girls. MOET through the School Health Policy advocates for readmission of adolescent mothers in schools where they were enrolled before falling pregnant and individual schools are relatively complying with this requirement. There is one vocational school which is currently catering for adolescent mothers and their babies, namely, Good Shepherd Centre for Teenage Mothers at Sehlabeng sa Thuathe. Currently there are a few secondary schools that do not admit boys who went to initiation schools during long summer vacations but negotiations are underway between MOET and the schools to revisit the approach. Regarding integration of children with special needs, and the Ministry will be piloting the combined school curriculum in 5 secondary schools by way of providing equipment to assist such children. The schools are Motsekuoa, Abia, St Catherine's, Mt Royal and 'Masenate. Support will also include training of teachers to identify children with disabilities and to refer them for appropriate medical interventions.

Answer to question 11

Elimination of child labour

33. The Government, through MOLE has established a Child Labour Unit which is responsible for addressing all child labour issues in the country, in particular livestock herding, domestic work and commercial sexual exploitation. Through the Unit, MOLE has developed Guidelines on employment of herd-boys which guides livestock farmers on herd boys' employment. MOLE has a Programme Advisory Coordinating Committee (PACC) at national level which oversees that labour laws of the land are adhered to. Chaired by the

Labour Commissioner, the Committee meets quarterly and deliberates on all issues of labour including those that affect children.

34. MOLE has also secured funding to conduct a study on "Worst Forms of Labour" this financial year (2018). The results of the study will inform government and stakeholders on the magnitude and geographic distribution of worst forms of labour among children in the country. The study will further facilitate programme planning of interventions by government and partners. MOLE is currently awaiting the results of the on-going Multiple Indicator Cluster Survey (MICS) in order to prepare for the study. The Labour Code is also currently undergoing an amendment process this fiscal year. The amendment allows Labour Inspectors to do inspection in private dwellings for vulnerable children. The definition of "Work" is being reviewed within the context of employment relations. The ILO cut-off age for employment of 15 years still remains a concern to the Government especially in relation to CPWA Amendment Bill 2018 which continue to advocate for 18 years as recognised globally per definition of a child. Therefore there is need to harmonize the respective provisions.

Answer to question 12

Age of criminal responsibility and operationalization of children's court

35. Children's Courts in Lesotho are operating in all 10 districts of the country. There are Magistrates who are designated for presiding over children's cases following training on the CPWA. They adjudicate on both criminal and civil cases relating to children. Currently, 99% of the cases are of children who are victims of various forms of abuse. Section 79 of the CPWA provides for categorization by age, of child offenders who are liable for prosecution in the Children's Courts. Through the support of UNICEF most children's courts were provided with CC TV Cameras for protection of child victims and witnesses.

36. Currently there are no separate holding cells for children in police stations, save to say one model police station in Mapoteng features such characteristic separate rooms for children. On the other hand, magistrates are not adequately equipped with victim support units.

Part II

Answer to question 13

37. Government submitted its report (CRC/C/LSO/2) in August 2016 to the UN. Below is a list of developments that took place after submission of the report evidenced by the relevant documentations:

(a) Bills or laws, and their respective regulations that were developed after August 2017

- CPWA Amendment Bill 2018;
- Disability Equity Bill 2018;
- Labour Code Bill 2018;
- Social Security Bill 2018;
- Registration of Births and Deaths Bill 2018.

38. All the above Bills will only have regulations following completion of the amendment process.

(b) New institutions (and their mandates) or institutional reforms (Ministries/sectors)

39. The country is currently undergoing extensive reforms with special focus on Constitution, Safety and Security, Public Service and Judiciary.

(c) Recently introduced policies, programmes and action plans and their scope and financing

40. Introduction of the "Justice for Children Programme" (J4C) Secretariat within the Probation Unit of the MOJCS; J4C is an approach which seeks to ensure that all children coming into contact with the justice authorities whether as alleged offenders, victims witnesses or as parties to non-criminal; law procedures have access to justice systems (formal/and or informal) and are better served and protected by these systems through full application of relevant international norms and standards. It considers children who come into contact with justice systems as victims/survivors, witnesses and alleged perpetrators. J4C refers to a range of strategies, processes and procedures aimed at taking into account the particular circumstance of a child before, during and after judicial proceedings. This new concept was unanimously adopted after extensive discussions by member countries at an International Conference on Best Interest for Children in the Justice System in August 2016 in Kenya where Lesotho participated.

Introduction of "Case Management" within the Department of Child Protection of the MOSD

41. The MOSD recently developed a standardised HIV sensitive case management system. To achieve the expected results the system will deliver a Case Management Operations model which will include Standard operating procedures, development of referral pathways between all the role players in child protection, tools and guidance as to how to use these tools. In addition collaboration mechanisms will be strengthened. Social Service workforce strengthening will also take place as training will need to be conducted in the use of this system. This project will end in September, therefore the Case Management operations manual will be developed, some Social Workers trained through a TOT approach from identified regions. It is hoped that trainers will roll out the training to the rest of the districts.

(d) Recent ratification of human rights instruments

42. There are no recent ratifications in place since the submission of the state report.

Part III

Answers to question 15 to 17

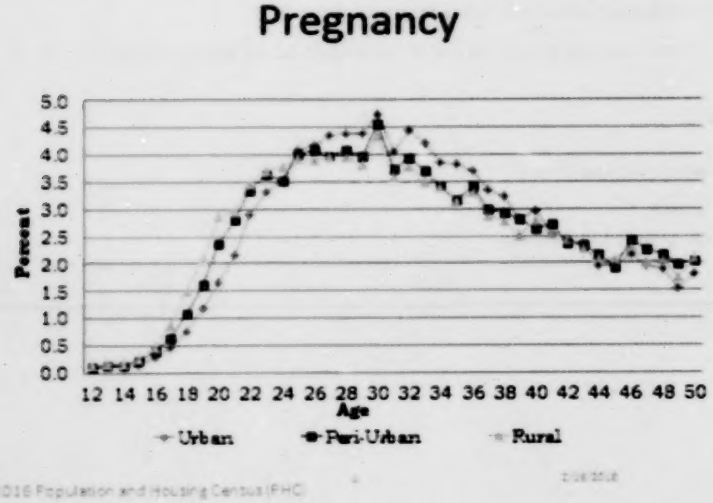
Table 15 (e) I
Children Adopted in Lesotho

	2015	*2016*	*2017*	*Total*
Age (yrs)				
0–4	5	6	1	12
5–9	5	1	5	11
10–14	2	3	2	7
15–>18	1	2	4	7
Subtotal	13	12	12	37
Sex				
M	6	4	7	17
F	7	8	5	20
Subtotal	13	12	12	37
Socioeconomic background				
Adopted by relatives	12	5	11	28
Parents due to poverty	0	0	0	0
Relatives due to poverty	0	1	0	1

	2015	2016	2017	Total
Abandoned	1	6	1	8
Subtotal	13	12	12	37
Geographic Location				
Mountains				
Foothills				
Urban	All urban			
Subtotal				
Grand total				

Table 16
Allocation of resources to the primary health-care system

	Year 2015/16	2016/2017	
Districts Central Total	11% of the entire Health Budget allocation		M 157 674 256.00 USD 25 421 372.00
Districts	M 114 615 046 USD 9 551 253.83	M 197 642 350.00	M 157 674 256.00 USD 25 421 372.00
Central	M 73 533 583.00 USD 6 127 798.58	M 2 888 090.00	M 25 421 372.00
Total	M 1 697 955 707 USD 141 496 309	M 1 768 858 870.00	M 1 959 025 474.00



Child Mortality

Under-5 (U/5) mortality — 98/1000

Infant mortality — 73/1000

Neonatal — 44/1000

Table 17
Children with disabilities in Lesotho

	Living in institutions	*Attending regular and informal primary*	*Attending secondary school*	*Attending special school*	*Living with families*
Age (yrs)					
0–4					
5–9					
10–14					
15–>18					
Subtotal					
Sex					
M	349	48	55	175	1 500
F	302	37	67	146	1 000
Subtotal	651	85	122	321	2 500
Type of disability					
Intellectual and multiple disabilities	321	0	0	321	2 500
Physical disability	63	0	36	0	0
Visual impairment	97	85	86	0	0
Hearing impairment	170	0	0	0	0
Subtotal	651	85	122	321	2 500
Geographic Location					
Mountains	235	46	51	129	0
Foothills	192	0	0	192	0
Urban	224	39	71	0	2 500
Subtoial	651	85	122	321	2 500

Prevalence of disability by sex and age

	Number		*Percentages*	
	Male	*Female*	*Male*	*Female*
05–09	1 022	782	56.7	43.3
10–14	997	915	52.1	47.9
15–19	1 053	1 033	50.5	49.5
Total	**3 072**	**2 730**	**53**	**47.1**